

# Outdoor Visitation Guidance for Long-term Care (LTC) Settings

The Washington State Department of Health recognizes the serious effects isolation can have on the health and well-being of residents in LTC facilities/agencies. The risk of COVID-19 transmission in LTC facilities and the need for family, partner or close friend interaction can be balanced under certain conditions. This document contains recommendations that LTC facilities/agencies are encouraged to follow and implement to mitigate the risk of COVID-19 transmission when allowing visits.

## Facility/Agency Criteria

### Infection Prevention Considerations

- Ensure adequate staff are present to assist with outdoor transition of residents/clients, and to assist with sanitation and disinfection of any visitation areas as necessary.
- Establish a process to identify anyone entering the facility, regardless of their vaccination status, who has any of the following three criteria so that they can be properly managed:
  - a positive viral test for SARS-CoV-2,
  - symptoms of COVID-19, or
  - close contact with someone with SARS-CoV-2 infection (for patients and visitors) or a higher-risk exposure (for healthcare personnel (HCP)).
- Facilities may use this [Visitor Log](#), or another similar log, to track visitor screening.
- Develop a system to educate residents/clients and visitor(s) on wearing a facemask or cloth face covering as source control according to [Secretary of Health Order](#) and [CDC Guidance](#). See [Cloth Face Covering and Mask FAQ](#).
- Select outdoor visitation spaces that support physical distancing of at least 6 feet between the visitor and resident/client.
- Provide alcohol-based hand rub to visitors and residents, and provide instruction (e.g., signage, verbal reminders, etc.) on correct use.

### Facility/Agency Safety Criteria


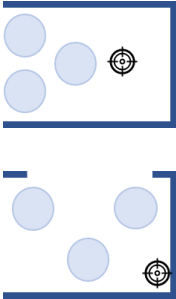
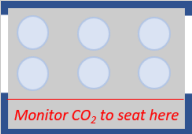
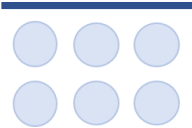

- Establish additional guidelines as needed to ensure the safety of visitations and their facility/home operations. These guidelines must be reasonable and must consider the individual needs of residents/clients.
- Follow state fire marshal requirements for safety related to tent use or other temporary shelter structures:
  - Proper installation and suitable anchoring
  - Flame resistant product use
  - Protection of residents, tents
  - Surrounding grounds must be free of combustible materials
  - Not obstruct fire hydrants

- Smoke-free and equipped with smoke-free signs
- Comfortable temperatures
- Fire marshal approved only heater use
- No open fires/flames within or around tents
- Fire marshal approved only lighting sources
- Clear unobstructed path for egress
- Easily opened doors and zippers
- Hard packed walking surfaces with no tripping hazards
- Illumination of operating in dark hours.
- Ensure residents wear proper clothing for outdoor climate and promote outside safety and comfortable temperatures via a structured shelter, parking lot, patio, or courtyard venue.

### **Tents and Canopies:**

- Outdoor tents and canopies that are separate from the physical structure of the facility are not under the jurisdiction of the State Fire Marshal (SFM) and the SFM would not have to review the structure.
- Local jurisdictions (LJ) and ordinances DO often regulate temporary structures:
  - The requirements vary by LJ, but often they regulate structures over 120 sq. ft., but some jurisdictions regulate to smaller sizes. Please consult with your LJ for specific requirements.
  - If regulated by the LJ, a permit for a temporary structure may be required. These are often for 90 days but may vary by LJ. Please consult with your LJ for specific requirements.
- Because the SFM will not be reviewing, Residential Care Services (RCS) will monitor these structures.
  - RCS staff may consult with the SFM deputy if questions or concerns about a structure arise.
- Structures should not be attached to buildings.
- Structures should be flame retardant and have no décor (including holiday decorations) or combustible materials.
- The facility may use propane heaters if the sides of the structure are open. If the sides are closed, facility must have a mechanism for measuring CO (carbon monoxide) levels inside the structure.

If setting up outdoor seating under an open-air tent, ensure visitors and residents are still seated with 6 feet of physical distance between them. Enclosed 4-wall tents will have less air circulation than open air tents. If outdoor temperature or weather forces requires that the tent sidewalls be up, leave one or more sides open or rolling up the bottom 12 inches of each sidewall to enhance ventilation while still providing a wind break.

Schematic	Features	Type
	Over three of the exterior walls are impermeable. Entrancedoors are <b><i>not</i></b> used to determine permeability.	Indoor
	One, two, or three wallsare permeable with multiple fully opened windows or bay doors.	OpenAir 1
	Dining area has two <b><u>non-adjacent</u></b> permeable walls with no barriers that exceed4 feet in height within 10 feet of the dining area.	OpenAir 2
	Covers, umbrellas, pergolas, or canopies; no sidewalls or other airflow barriers that exceed 4 feet in height within 10 feet on three or more sides of the dining area.	OpenAir 3
	Enclosed, small-groupstructure such as igloo or pod.	OpenAir 4

- If the facility uses electrical heat within the structure, the facility must assure safety measures are in place, including mitigation of trip hazards.
- The facility must ensure that staff, visitors, and residents cannot back into, bump, or knock over any heat source used. The facility must assure safety measures are in place to mitigate the risk of burn.
- Facilities must consult with the local emergency response to assure the structure is not set up in the staging area for the response vehicles.

### Hybrid indoor/outdoor model:

- All of the above must be met and:
  - Nothing may be attached to the building.
  - The residents, visitors, and structure may not obstruct the egress.
  - The residents, visitors, and structure may not obstruct Emergency Responders.

### Resident/Client Criteria

- Residents/clients in isolation for COVID-19 or suspected COVID-19, who have [signs or symptoms](#) of COVID-19, or are in a [quarantine or observation period](#) are not eligible for outside visits.
  - Visitors should not visit LTCFs for at least 10 days from onset of COVID-19 symptoms and be 24 hours without a fever with no fever reducing medication and improvement of symptoms, or 10 days from positive SARS-CoV-2 viral test if asymptomatic.
  - Visitors should not visit LTCFs for 10 days following an exposure (day 0) to SARS-CoV-2 or 7 days with a negative test within 48 hours and they do not develop symptoms.
- Residents/clients who had COVID-19 and are no longer considered infectious according to [CDC's Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](#) are eligible for outside visits.
- Residents/clients and visitor(s) should wear a facemask or cloth face covering as source control according to [Secretary of Health Order](#) and [CDC Guidance](#). See [Cloth Face Covering and Mask FAQ](#).

### Visitor criteria

- Visitors should wear a well-fitting facemask or cloth face covering as source control according to [Secretary of Health Order](#) and [CDC Guidance](#) See [Cloth Face Covering and Mask FAQ](#).
- Visitors must use alcohol-based hand rub or wash hands with soap and water upon entering and exiting the visitation area.
- Facilities/agencies must screen visitors for signs and symptoms of COVID-19. They must identify anyone entering the facility for any of the following:
  - a positive viral test for SARS-CoV-2,
  - symptoms of COVID-19, or
  - close contact with someone with SARS-CoV-2 infection (for patients and visitors)

or a higher-risk exposure (for healthcare personnel (HCP).

Facilities may use this [Visitor Log](#), or another similar log, to track visitor screening.

- Visitors should not walk through the facility/home to get to the outdoor visitation area, if possible.
- Visitors must sign in at entrance to the facility/home and provide contact information.
- Visitors who bring children under the age of 12 are responsible for supervising the children and ensure they comply with handwashing, hand sanitizing, masking and social distancing requirements.
- Consult with the facility/home prior to bringing a pet and follow the facility/home's policy regarding pets. Visitors who bring pets are responsible for supervising the pet(s) during a visit and are responsible for any associated sanitation requirements.
- Visitors must stay in designated visitation locations.

## Weather:

- Visits should occur only on days when there are no weather warnings that would put either the visitor or resident/client at risk.

## Visitation Denials:

Facilities/homes can deny outdoor visitation if they believe:

- Circumstances pose a risk of transmitting COVID-19 in the facility/home because the resident/client or visitor does not comply with infection control guidance, or
- The resident/client or visitor is at risk of abuse/harm.

Residents and their loved ones may contact providers with questions about outdoor visits. Facilities and agencies should ensure residents/clients and their loved ones, have access to the Office of Ombudsman for Long-Term Care at <https://www.waombudsman.org/> or the Office of Developmental Disabilities Ombuds at <https://ddombuds.org/>

## More COVID-19 Information and Resources

Stay up-to-date on the [current COVID-19 situation in Washington](#), [Governor Inslee's proclamations](#), [symptoms](#), [how it spreads](#), and [how and when people should get tested](#). See our [Frequently Asked Questions](#) for more information.

A person's race/ethnicity or nationality does not, itself, put them at greater risk of COVID-19. However, data are revealing that communities of color are being disproportionately impacted by COVID-19. This is due to the effects of racism, and in particular, structural racism, that leaves some groups with fewer opportunities to protect themselves and their communities. [Stigma will not help to fight the illness](#). Share only accurate information to keep rumors and misinformation from spreading.

- [WA State Department of Health 2019 Novel Coronavirus Outbreak \(COVID-19\)](#)
- [WA State Coronavirus Response \(COVID-19\)](#)

- [Find Your Local Health Department or District](#)
- [CDC Coronavirus \(COVID-19\)](#)
- [Stigma Reduction Resources](#)

**Have more questions?** Call our COVID-19 Information hotline: **1-800-525-0127**

Monday – 6 a.m. to 10 p.m., Tuesday – Sunday and [observed state holidays](#), 6 a.m. to 6 p.m. For interpretative services, **press #** when they answer and **say your language**. For questions about your own health, COVID-19 testing, or testing results, please contact a health care provider.

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 ([Washington Relay](#)) or email [civil.rights@doh.wa.gov](mailto:civil.rights@doh.wa.gov).